

Due By April 25, 2008

FDA 112/66 07 FS-1 OBLO

Rhode Island Ethics Commission

2007 YEARLY FINANCIAL STATEMENT

CHRISTOPHER B MASELLI 32 GOLDEN VIEW DRIVE JOHNSTON RI 02919ETHICS COMMISSION
OR APR 22 PM 3: 37

ALL QUESTIONS REFER TO THE CALENDAR YEAR JANUARY 1, 2007 THROUGH DECEMBER 31, 2007 UNLESS OTHERWISE SPECIFIED.

PLEASE ANSWER <u>ALL QUESTIONS</u> AND WHERE YOUR ANSWER IS "NONE" OR "NOT APPLICABLE" SO STATE. ANSWERS SHOULD BE PRINTED OR TYPED, and additional sheets may be used if more space is needed. For clarification of any question, read instruction sheet.

Note: If you are a state or municipal official or employee that is required to file a Yearly Financial Statement, a failure to file the

Statement is a violation of the law and may subject you to substantial penalties, including fines. If you received a 2007 Year-

ly Financial Statement in the mail but believe you did not hold a public position in 2007 or 2008 that requires such filing, you should contact the Ethics Commission (See Instruction Sheet for contact information). MASELLIS Christophe B NAME OF OFFICIAL (LAST) (FIRST) (INITIAL)

32 bolder View Drive Johnston 02919

HOME ADDRESS (STREET) (CITY/TOWN) (ZIP CODE) 3. List Public Position(s) you hold and governmental unit: State Senate Ristrict 25 (PUBLIC POSITION) (MUNICIPALITY, STATE OR REGIONAL) I was elected on $\frac{11/3006}{\text{(date)}}$ I was appointed on $\frac{1}{\text{(date)}}$. I was hired on ____. If you no longer hold a public position, state date of termination or resignation __ 4. List elected office(s) for which you were/are a candidate in either calendar year 2007 or 2008 (Read instruction #4) Stade Savate Pistrict 25 5. List the following: NAME OF SPOUSE NAME(S) OF DEPENDENT CHILD OR CHILDREN Giancarlo J. Maselli Giuliana M. Maselli Jon K. Maselli

6. List the names of any employer from which you, your spouse, or dependent child received \$1,000 or more gross income during calendar year 2007. If self-employed, list any occupation from which \$1,000 or more gross income was received. If employed by a state or municipal agency, or if self-employed and services were rendered to a state or municipal agency for an amount of income in excess of \$250, list the date and nature of services rendered. If the public position or employment listed in #3, above, provides you with an amount of gross income in excess of \$250 it must be listed here. (Do Not List Amounts.) NAME OF FAMILY NAME AND ADDRESS DATES AND NATURE MEMBER EMPLOYED OF EMPLOYER OR OCCUPATION OF SERVICES RENDERED Christopher Maselli Entire year of Maselli Law Associates 269 Green. The Are Johnston, RI 02919 Christopher Maselli Selfenplayed Attorney 269 Green. The Ave Entire year of Johnston, RI-02919 A See Additional Page 7. List the address or legal description of any real estate, other than your principal residence, in which you, your spouse, or dependent child had a financial interest. NATURE OF INTEREST ADDRESS OR DESCRIPTION NAMES Joint Tevents 58 Peckhan Bre Christopher Maselli And Joseph Maselli North Prov, NI 02908 65 Pine Hill Ave Tout Tanants Christopher maselli Johns tow, RI + Joy Maselli 8. List the name of any trust, name and address of the trustee of any trust, from which you, your spouse, or dependent child or children individually received \$1,000 or more gross income. List assets if known. (Do Not List Amounts.) NIA NAME OF TRUST: NAME OF TRUSTEE AND ADDRESS: NAME OF FAMILY MEMBER RECEIVING TRUST INCOME: 9. List the name and address of any business, profit or non-profit, in which you, your spouse, or dependent child held a position as a director, officer, partner, trustee, or a management position. NAME OF FAMILY MEMBER NAME AND ADDRESS OF BUSINESS President/ Sola Onne-Maschi Lam Associates PC Christopher MASCIL 269 Greenville Ave Johnston, RI 02919 Focus Real Estate Group, Inc. president/ Christopher Maselli 269 Greensille Ave Sole Owner Johnston, RE 12919

10. List the name and address of any interested person, or business entity, that made total gifts or total contributions in excess of \$100 in cash or property during calendar year 2007 to you, your spouse, or dependent child. Certain gifts from relatives and certain campaign contributions are excluded. (See instruction #10)

NAME OF PERSON RECEIVING GIFT OR CONTRIBUTION

NAME AND ADDRESS OF PERSON OR ENTITY MAKING GIFT OR CONTRIBUTION

11. List the name and address of any business in which you, your spouse, or dependent child individually or collectively holds a 10% or greater ownership interest, or a \$5,000 or greater ownership or investment interest.

NAME OF FAMILY MEMBER

Christpher Maselli

Christopher Maselli

NAME AND ADDRESS OF BUSINESS

Majelli Law Associates PC 269 Greenville Are Johnston, RI 02919

Folus Real Estate Group, Inc 2696 renville Ave

Johnson, RE 02919

A sel Additional page

12. If any business listed in #11, above, did business in excess of a total of \$250 in calendar year 2007 with a state or municipal agency, AND you are a member or employee of the agency or exercise direct or legislative control over the agency, list the following:

NAME AND ADDRESS OF BUSINESS

NAME OF AGENCY

DATE AND NATURE OF TRANSACTION

13. If any business listed in #11, above, was a business entity subject to direct regulation by a state or municipal agency, AND you are a member or employee of the agency or exercise direct or legislative control over the agency, list the following:

NAME AND ADDRESS OF BUSINESS

NAME OF REGULATING AGENCY

14. If you, your spouse, or dependent child individually or collectively acquired or divested a 10% ownership interest or a \$5,000 or greater ownership or investment interest in a business after January 1, 2008 and before the date you file this statement AND if said business was regulated by a state or municipal agency of which you are an employee or a member, or over which you exercise direct or legislative authority, list the following: NAME AND ADDRESS OF BUSINESS **DESCRIPTION OF INTEREST (NOT AMOUNT)** AND DATE ACQUIRED AND/OR DIVESTED

NID

NAME OF REGULATING AGENCY

HOW REGULATED

NAME AND ADDRESS OF LENDER

15. If you, your spouse, or dependent child individually or collectively acquired or divested a 10% ownership interest or a \$5,000 or greater ownership or investment interest in a business after January 1, 2008 and before the date you file this statement, which did business in excess of \$250 with a state or municipal agency of which you are an employee or a member, or over which you exercise direct or legislative authority, list the following:

NAME AND ADDRESS OF BUSINESS

DESCRIPTION OF INTEREST DATE ACQUIRED AND/OR DIVESTED (DO NOT INCLUDE AMOUNT)

NAME OF STATE OR MUNICIPAL AGENCY

WA

16. If you, your spouse or dependent child were indebted in an amount in excess of one thousand dollars (\$1,000) to any person, business entity or other organization other than (i) any person related to you, your spouse or dependent child at any time within the third degree of consanguinity, or (ii) a financial institution regulated by any state or by the United States where such indebtedness is secured solely by a mortgage of record on real property used exclusively as your principal residence, or (iii) any indebtedness arising from transactions involving credit cards, please list the following:

NAME AND ADDRESS OF DEBTOR	NAME AND ADDRESS OF LENDER
National City Mortgage	3232 Newmark Dr. Miamis but OH 45342
Citizens Bank	1C,7, Zans PL., Prov. RI 02903
American Education Services	P.O. Box 2461, Harrishung, PH 11105
GreatLakes Education Loans,	240 International Love, Madison, WI 05370
Sallie Mac Servicing, BO. BOX	4600 WILKES BARR, PA, 18773
presented as to the financial information and intere children. I acknowledge that I may request an advi	Statement is a complete and accurate response to the questions ests during the year 2007 of myself, my spouse, and my dependent sory opinion from the Ethics Commission as to my conduct under see Code of Ethics will be provided to me at no cost upon request
State of Rhode Island ,	SIGNATURE
County of Providence	
Subscribed and sworn to before me at	this 2dns day of April 2008.
My Commission expires: 1/6/09	SIGNATURE OF NOTARY PUBLIC POPER N. Wan In
THIS STATEMENT WILL BE RETURNED I	FIT IS NOT SIGNED AND NOTARIZED AND IF ANY MAY 3 11

QUESTION IS NOT ANSWERED.

6. Continued:

<u>NAME</u> <u>ADDRESS</u> <u>DATES</u>

Christopher Maselli State of Rhode Island Entire year of 2007

Capitol Hill Senator
Providence, RI 02903

T 1/1/07 + 1/20/07

Christopher Maselli Focus Real Estate Group, Inc. 1/1/07 to 4/30/07 269 Greenville Avenue Real Estate Broker

Johnston, RI 02919

ov K. Maselli Town of Lincoln Entire Year of 2007-

Joy K. Maselli Town of Lincoln Entire Year School Dept. Teacher

1624 Lonsdale Avenue Lincoln, RI 02865

11. Continued:

<u>NAME</u> <u>ADDRESS</u>

Christopher Maselli Christopher Maselli, Esq. 269 Greenville Avenue

Johnston, RI 02919